Welcome to Fireside Chats

Aging with Dignity -
How one Ontario region is helping seniors age at home

February 12, 2009
1:00 – 2:30 PM Eastern Time

Advisor on Tap: Chantale LeClerc, RN, MSc, GNC(C), Senior Director Planning, Integration and Community Engagement Champlain Local Health Integrated Network, Ontario

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Chantale LeClerc, 12.02.09

Housekeeping

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Visual Presentation: from our computer to yours....
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- There may be a few seconds delay in transmission
- If difficulties: use the back up PowerPoint Presentation: www.chnet-works.ca
  - click on Fireside Chat, scroll to today’s ‘chat’ info

Agenda:
- Sign in and tech help prior to the ‘chat’...
- Welcome, Housekeeping and Introductions
- Presentation and Discussions
- Closure

Chantale LeClerc, 12.02.09
Today’s ‘chat’...

Aging with Dignity - How one Ontario region is helping seniors age at home

• The Champlain Local Health Integration Network is embarking on an exciting initiative to help seniors stay healthy in their own homes.

• Supported by a significant investment in funds and policy changes, the strategy involves a shift in emphasis from institutional care to a more comprehensive mix of community-based services for seniors and their caregivers, enhancing traditional services and implementing innovative programs.

• Advisor on Tap, Chantale LeClerc will share perspectives re: issues related to an aging population, describe the region's demographics, outline strategies and related policy changes, share current outcome data as well as how this region is evaluating their investment in these programs/services and policies.

Chantale LeClerc, 12.02.09
Healthy Aging: One LHIN’s Strategy

Chantale LeClerc, RN, MSc, GNC(C)
Fireside Chat
February 12th, 2008

Overview of Today’s Chat

• What is a LHIN?
• Champlain LHIN
• Seniors in Champlain
• Provincial Aging at Home program
• Champlain’s Aging at Home strategy
• Implications for healthy aging
What is a LHIN?

**Local Health Integration Networks (LHINs)**
- Announced in 2004, incorporated June 2005
- 14 geographically based, not-for profit, crown corporations
- Operate under Local Health System Integration Act, 2006 and an Accountability Agreement with MOHLTC
- Designed to plan, integrate and fund local health care services

LHIN Health Sectors

- Long-Term Care Homes
- Community Care Access Centres
- Hospitals
- Community Support Services
- Community Health Centres
- Addiction Services
- Mental Health Services
What is a LHIN?

- A health systems improvement and transformation initiative
- Not a provider of direct services
- Respects and supports local governance of health care delivery organizations
- Works alongside community health care providers
- No hard boundaries for patients
- Manages the alignment of the multiple interdependent parts of each local system
What is a LHIN?

- Users will experience services as seamless
- The match between single services provided and the multiple needs of clients will improve
- Improved system interactions will improve the use of system resources

LHIN Mandate

- LOCAL HEALTH SYSTEM PLANNING
- INTEGRATION & SERVICE COORDINATION
- COMMUNITY ENGAGEMENT
- FUNDING & ALLOCATING
- ACCOUNTABILITY & PERFORMANCE MANAGEMENT

Chantale LeClerc, 12.02.09
Champlain LHIN Context

- 1.2 Million (9.4% of Ontario population)
  - ~70% in City of Ottawa
- 206,000 francophones (20% of Champlain population)
  - Proportion varies across Champlain
  - 38% of the francophone population of Ontario
  - 92% of the francophones of Eastern Ontario
- Ottawa-highest median family income of Canadian cities
  - But low in some areas: Renfrew County, Cornwall, Hakwesbury
- Health and socioeconomic measures similar to Ontario (but much variation within)
Champlain LHIN Context

- 97% of hospital use in-region
- 5% of Champlain hospital services used by Quebecers

Champlain LHIN Funded Service Providers by Sites and Geographic Areas

<table>
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<tr>
<th>Sector</th>
<th>CofC</th>
<th>CHC Main Site</th>
<th>CHC Satellite</th>
<th>CSS</th>
<th>MH</th>
<th>Add.</th>
<th>CCAC Branch Office</th>
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*Includes the Royal Ottawa Health Care Group addictions service
**Includes Bruyère Continuing Care, the Children's Hospital of Eastern Ontario, the Ottawa Heart Institute, the Royal Ottawa Health Care Group, and The Ottawa Hospital (3 sites)
†Includes Wabano Centre for Aboriginal Health (not a CHC) which receives mental health funding from the LHIN
∆CCAC Headquarters
‡CCAC satellites based at all sites of The Ottawa Hospital
Champlain LHIN: Mission

“To build a coordinated, integrated, and accountable health system for people where and when they need it. Our mission is based on a strong foundation of local community engagement, comprehensive planning, and appropriate resource allocation.”

Champlain LHIN
Integrated Health Service Plan

Six Strategic Directions:

• Access
• Primary Health Services
• Chronic Disease Prevention and Management
• Addictions and Mental Health
• Elderly with Complex and Chronic Conditions
• E-health
ACCESS

Right service, right place, right time, right people

- Wait times (efficiency, system wide approach)
- ALC (Appropriate Level of Care)
- Coordination of Transportation
- Human Resource Planning
- Services Closer to Home
- Diversity and Special Needs

Chantale LeClerc, 12.02.09

Champlain LHIN 2009-10 Annual Plan
Champlain Seniors

- 13.2% of pop 65 yrs + (12.7% in Ontario)
  - 11.2% in Ottawa East to 16.8% in RC

- 6.0% of pop 75 yrs + (6.1% in Ontario)
  - 4.9% in EC to 7.9% in RC

- 27% live alone (26% in Ontario)
  - 24% in NL/NG to 31% in Ottawa Centre

- 1.5% live with non-relatives (1.5% in ON)
  - 0.6% in NL/NG to 2.1% in Ottawa East
**Concept of Health Pathway**

Adapted from *A Potential Model for Health Care for Ontario’s Elderly*, Mary Lou Kelley, March 1999

- **Tenuous Coping**
  - Health / Resource Crisis
  - Health / Resource Recovery
  - Health / Resource Stabilisation

- **De-stabilisation**
  - Decline

- **Improve capacity for selfcare**
  - Prevent further deterioration
  - Restore Health
  - Maintain Stability
  - Re-stabilise

- **Control rate of deterioration**

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**Provincial Aging at Home Strategy**

- $700 B investment announced in August 2007
- Overall aim: Support seniors to lead healthy, independent lives in own homes
- 3-year, $593 million to LHINs
- Focus on innovation (20%)
- Emphasis on needs of culturally diverse populations
- Support to “non-traditional” groups
Provincial Aging at Home Strategy

- Ensuring that seniors’ homes support them
- Supportive social environments
- Senior-centered care that is easy to access
- Identifying innovative solutions to keep seniors healthy
- *Shift in focus in 2008 to reducing ALC and improving ER wait times*

Champlain Aging at Home Strategy

- **2007-2008**
  - $246,000 for planning (non-recurring)
- **2008-2009**
  - $6,928,868
- **2009-2010**
  - $17,219,166
- **2010-2011**
  - $30,411,697 (on-going to base)
Target Population

• Vulnerable, frail elderly at risk of:
  • Cognitive and functional decline
  • Hospitalization
  • LTC admission
  • Unmet caregiver needs

• With one other risk factor related to social frailty
  (isolation, low income, inadequate caregiver support)

Target Population

• Individuals benefiting from healthy aging health
  promotion and prevention intervention

  • Creating conditions of healthy aging
  • Screening
  • Early identification
Champlain Aging at Home Strategy

• Increase supply & range of services
  • Seniors remaining at home
  • More residential options

• Relieve pressures on hospitals & LTCH
  • Improve flow through institutions
  • Avoiding health crises – proactive wellness

• Respect the desire for dignity & independence

• Meet demand for continuing care
  • Cost-effectiveness
  • Sustainability

Milestones

• Created Aging at Home Directional Plan (Oct 07)
• Call for expression of interest (Nov 07) (121)
• Evaluation of EOI (Nov-Dec 08)
• Receipt of detailed service plans (Jan 08) (31)
• Approval of plans by BOD (Feb&Mar 08)
• Submission of plans to MOH (Feb&Mar 08)
• Finalizing service agreements (June-Jul 08) (28)
• Projects began (July-Sept 08)
Milestones (continued)

- Development of an evaluation framework (Sept 08)
- LTC bed study (Sept 08)
- Planning for 2009-10 (Oct-Nov 08)

Champlain Aging at Home Projects

- Community Outreach
  - Integrated Falls Program
  - Primary Care Outreach to Frail Seniors
  - Enhanced Specialized Geriatric Mental Health Outreach Teams
  - Emergency Department Nurse Practitioner Outreach to LTC
  - Community Outreach Project
Champlain Aging at Home Projects

- **In-Home Services**
  - Aging in Place
  - Support Services in Homes of First Nation Seniors from First Nation Health Providers
  - Going Home Project

Champlain Aging at Home Projects

- **Day Programs**
  - Circle of Care-A Culturally Relevant Initiative for Aboriginal seniors
  - Day Program Expansion

- **Respite**
  - Relief and Respite Supports for Caregivers of persons with dementia
Champlain Aging at Home Projects

• **Community Education & Support**
  • Senior Immigrant Engagement Program
  • First Link Program

• **Primary Health Care**
  • Integrated Primary Health Team Embrun
  • Health and Wellness Clinics
  • Regional Geriatrics & Community Intervention
  • Aging at Home Care Collaborative
  • Memory Disorder Clinic

Champlain Aging at Home Projects

• **Supportive Housing**
  • Expansion of Supportive Housing Services for Homeless & Street Involved Seniors
  • SH & Respite in Subsidized Housing
  • Affordable Supportive Housing Continuum of Support - The Villages
  • Supportive Housing – Homeless Senior Women (Cornerstone)
  • Assisted Living Fairfields
  • Algonquins of Pikwàkanagàn Supportive Housing/homecare
  • 24 Hr Flexible In-Home Supportive Housing
Champlain Aging at Home Projects

- **Transitional Care**
  - Crisis Beds for Abused Seniors
  - Quick Response Service
  - Résidence Montfort Renaissance
  - Community Supportive Care Program
  - Transitional Care

- **System Navigation**
  - Coordinated Access for Palliative & End-of-Life Clients
  - Website Development for Community Support Services
Champlain Aging at Home Strategy

Impact on ALC/ED

<table>
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<tr>
<th>Direct</th>
<th>Diversion</th>
<th>Preventative</th>
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<tbody>
<tr>
<td>Patient is either already in ED or ALC—patient being discharged or moved from acute to transition care setting</td>
<td>Patient is high risk of presenting in ED if supports/services are not provided or maintained</td>
<td>Patient is low to medium risk of presenting in ED if supports/services are not provided or maintained</td>
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<tr>
<td>40%</td>
<td>42%</td>
<td>18%</td>
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Evaluation Framework

Identify whether the Champlain Aging at Home strategy is:

- Reaching its target population
- Meeting its stated goals and objectives
- Supporting health system integration from the perspective of seniors, caregivers, and health service providers
- Funds are being invested wisely
- Fostering innovation
- Delivery models are sustainable and scalable
- Aligned with the MOHLTC objectives
Evaluation Framework

- Use of mixed methods: Quantitative data (numbers and statistics), one-on-one semi-structured in depth interviews, focus groups
- Combination of process evaluation (i.e. have we done what we said we would do?) and outcome evaluation (i.e. what results is the strategy producing?)

Provincial Performance Indicators

- Wait time to LTC placement
- Proportion with high MAPLe scores
- ED visits/hospitalizations among home care clients
- Alternate level of care days
- Satisfaction with health care in the community
Champlain Measures

- Degree, facilitators/barriers of innovation
- Degree, facilitators/barriers of integration (coordination of care)
- Senior’s experience of aging at home

Questions for Reflection

- Right population?
- Targeted versus broad approach?
- Enough upstream?
- Right drivers to inability to age at home?
- Impact on integration and health system transformation?
- Impact on seniors health?
Your comments, insights and questions….

- Re: the need for policy changes, success factors and barriers, evaluation considerations…
Thanks for joining in!

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- Please contact the CHNET-Works! Animateur if you are interested in collaborating on future fireside chat discussions

animateur@chnet-works.ca